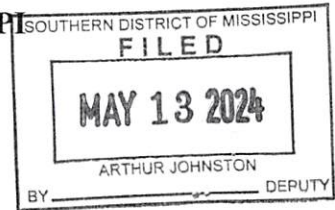


FORM TO BE USED BY PRISONERS IN FILING A COMPLAINT UNDER THE CIVIL RIGHTS ACT, 42 U.S.C. §1983

**IN THE UNITED STATES DISTRICT COURT
FOR THE SOUTHERN DISTRICT OF MISSISSIPPI**

COMPLAINT

Johnson L0010
(Last Name) (Identification Number)

Dejuan Marguis
(First Name) (Middle Name)

Pike County Jail
(Institution)

2109 Jessie Hall memorial rd. Magnolia MS, 39652
(Address)

(Enter above the full name of the plaintiff, prisoner, and address of plaintiff in this action)

V.

CIVIL ACTION NUMBER:

5:24cv 47-DCB-ASH
(to be completed by the Court)

Pike County Jail

(Enter the full name of the defendant(s) in this action)

GENERAL INFORMATION

- A. At the time of the incident complained of in this complaint, were you incarcerated?
Yes (☒) No (☐)
- B. Are you presently incarcerated?
Yes (☒) No (☐)
- C. At the time of the incident complained of in this complaint, were you incarcerated because you had been convicted of a crime?
Yes (☒) No (☐)
- D. Are you presently incarcerated for a parole or probation violation?
Yes (☒) No (☒)
- E. At the time of the incident complained of in this complaint, were you an inmate of the Mississippi Department of Corrections (MDOC)?
Yes (☐) No (☒)
- F. Are you currently an inmate of the Mississippi Department of Corrections (MDOC)?
Yes (☐) No (☒)

PARTIES

(In item I below, place your name and prisoner number in the first blank and place your present address in the second blank.)

I. Name of plaintiff: Devion Johnson Prisoner Number: 60010
 Address: 2109 Jessie Hall memorial rd
magnolia ms, 39652

(In item II below, place the full name of the defendant in the first blank, his official position in the second blank, and his place of employment in the third blank. Use the space below item II for the names, positions and places of employment of any additional defendants.)

II. Defendant: Pike County Jail is employed as Pike County Jail
at 2109 Jessie Hall memorial rd, Magnolia MS 39652

The plaintiff is responsible for providing his/her address and in the event of a change of address, the new address of plaintiff as well as the name(s) and address(es) of each defendant(s). Therefore, the plaintiff is required to complete the portion below:

PLAINTIFF:

NAME: Devion Johnson ADDRESS: 2109 Jessie Hall memorial
Johnson rd Magnolia MS, 39652

DEFENDANT(S):

NAME: Pike County Jail ADDRESS: 2109 Jessie Hall memorial rd magnolia ms, 39652

OTHER LAWSUITS FILED BY PLAINTIFF

NOTICE AND WARNING

The plaintiff must fully complete the following questions. Failure to do so may result in your case being dismissed.

- A. Have you ever filed any lawsuits in a court of the United States? Yes (☒) No (☐)
- B. If your answer to A is yes, complete the following information for each and every civil action and appeal filed by you. (If there is more than one action, complete the following information for the additional actions on the reverse of this page or additional sheets of paper.)

CASE NUMBER 1.

1. Parties to the action: Devuan Johnson / 1/5 Ready
Temporary Services
2. Court (if federal court, name the district; if state court, name the county): Federal Court, Denver County
3. Docket Number: Dont know
4. Name of judge to whom case was assigned: Dont know
5. Disposition (for example: was the case dismissed? If so, what grounds? Was it appealed? Is it still pending?) Still pending

CASE NUMBER 2.

1. Parties to the action: _____
2. Court (if federal court, name the district; if state court, name the county): _____
3. Docket Number: _____
4. Name of judge to whom case was assigned: _____
5. Disposition (for example: was the case dismissed? If so, what grounds? Was it appealed? Is it still pending?) _____

- III. State here as briefly as possible the facts of your case. Describe how each defendant is involved. Also, include the names of other persons involved, dates and places. Do not give any legal arguments or cite any cases or statutes. If you intend to allege a number of different claims, number and set forth each claim in a separate paragraph. (Use as much space as you need; attach extra sheet(s) if necessary).

*Dike County is responsible for the following: Conditions of Confinement
No lights in cell, exposure wires, sleeping on floors, inadequate bedding (no
sheets, thin blankets) overcrowding, mold in showers, and in cells Dust
and dirt on walls and cells and in vent. inadequate yard cells
for 2 times a month No law library poor or no hygiene for inmates
poor or no health care No locks on cells (prison violation) No officer
in the guard tower No way to alert officers of emergencies poor food
but adequate meals to sustain a grown man. False arrest and
false imprisonment.*

RELIEF

- IV. State what relief you seek from the court. Make no legal arguments. Cite no cases or statutes.

*280,000 compensatory damages all charges
dismissed and immediate release 25,000
in punitive damages*

Signed this 7 day of May, 2024.

I declare (or certify, verify or state) under penalty of perjury that the foregoing is true and correct.

DeJuan Johnson
Signature of plaintiff